

<h1 style="margin: 0;">CLAIMS ONLY</h1>				Application Number <div style="font-size: 1.5em; font-family: cursive;">10/040470</div>		Filing Date.	
				Applicant(s)			
* May be used for additional claims or amendments							
CLAIMS		AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend	
1							51
2							52
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47							97
48							98
49							99
50							100
Total Indep							Total Indep
Total Depend							Total Depend
Total Claims							Total Claims

Filing Date.

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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Total Depend						
Total Claims						

	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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Total Indep						
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Total Claims						